

10/19

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<del>XS</del>		08/6/00
O.I.P.E. CLASSIFIER		59	84
FORMALITY REVIEW	LL	827	9/8
RESPONSE FORMALITY REVIEW	SS	573	03-16-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original 21/12/02
1	✓ 5/28/02
2	✓ ✓
3	✓ ✓
4	✓ ✓
5	✓ O
6	✓ ✓
7	D
8	✓ O
9	✓ O
10	✓ O
11	✓ O
12	✓ ✓
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14	✓ ✓
15	✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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